

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Black PAC			FEC IDENTIFICATION NUMBER ▼ C C00609388		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 12 / 2016</div> </div>		
Full Name of Payee PRIORITIES USA ACTION			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 10 / 2016</div>		
Mailing Address 1101 15TH STREET NW 2ND FLOOR			Amount <div style="border: 1px solid black; padding: 2px;">500000.00</div>		
City Washington State DC Zip Code 20005		Transaction ID : D367873 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 10 / 2016</div>			
Purpose of Expenditure Digital Advertising		Category/Type 004			
Name of Federal Candidate TRUMP, DONALD J, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px;">1575760.11</div>		
			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Big Bowl of Ideas			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 10 / 2016</div>		
Mailing Address 110 E 9th St. Ste. B-237			Amount <div style="border: 1px solid black; padding: 2px;">10000.00</div>		
City Los Angeles State CA Zip Code 90079		Transaction ID : D368146 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 10 / 2016</div>			
Purpose of Expenditure Digital Advertising Production		Category/Type 004			
Name of Federal Candidate TRUMP, DONALD J, , ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px;">1575760.11</div>		
			Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px;">510000.00</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px;">510000.00</div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Hudson, Gerald, , ,</u>			Date <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 10 / 12 / 2016</div>		
			[Electronically Filed]		